

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of: Holmes et al.

Serial No.: 10/708,717

Filed: 03/19/2004

For: OMNI VOLTAGE DIRECT
CURRENT POWER SUPPLY

)
) **Customer No.:** 29000
)

) **Confirmation No.:** 2716
)

) **Group Art Unit:** 2838
)

) **Examiner:** R. B. Patel
)

) **Office Action dated:**
)

) July 30, 2007
)
)

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

**RESPONSE UNDER 37 CFR § 1.116
EXPEDITED PROCEDURE
EXAMINING GROUP 2838**

AMENDMENT OR RESPONSE AFTER FINAL REJECTION — TRANSMITTAL

Transmitted herewith are: 1) Amendment and Response After Final Action (37 CFR § 1.116); 2) Power of Attorney by Inventors; and 3) Change of Correspondence Address for this application.

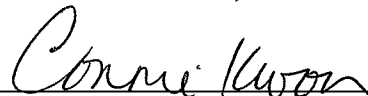
☐ Applicant(s) petitions for an extension of time under 37 CFR § 1.136 [fees: 37 CFR § 1.17(a)(1)-(4)] for the total number of months checked below:

EXTENSION (months)	FEE FOR SMALL ENTITY	FEE FOR OTHER THAN SMALL ENTITY
1 month	<input type="checkbox"/> \$60.00	<input type="checkbox"/> \$120.00
2 months	<input type="checkbox"/> \$225.00	<input type="checkbox"/> \$450.00
3 months	<input type="checkbox"/> \$510.00	<input type="checkbox"/> \$1,020.00
4 months	<input type="checkbox"/> \$795.00	<input type="checkbox"/> \$1,590.00

CERTIFICATE OF TRANSMISSION

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being transmitted via electronic filing (EFS-Web) on the date shown below to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

September 28, 2007
Date of Transmission



Connie Kwon

- ☐ An extension for _____ months has already been secured and the fee paid therefor of _____ is deducted from the total fee due for the total months of extension now requested.
- ☐ Extension fee due with this Request _____.
- ☒ **NO ADDITIONAL EXTENSION FEE IS REQUIRED.**

FEEES FOR CLAIMS:

- ☒ Applicant claims small entity status under 37 CFR 1.27.

The fees for claims (37 CFR § 1.16(b)-(d)) have been calculated as shown below:

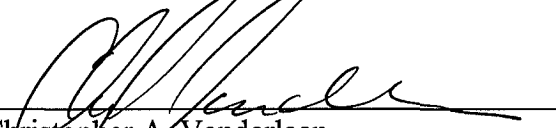
Total Claims	40	-	40	=	0	x	\$50.00	\$0.00
Independent Claims	4	-	4	=	0	x	\$200.00	\$0.00
Multiple Dependent Claims	\$360	(if applicable)					<input type="checkbox"/>	\$0.00
TOTAL OF ABOVE CALCULATIONS								\$0.00
Reduction by ½ for Filing by Small Entity. Note 37 CFR §§ 1.9, 1.27, 1.28.								<input checked="" type="checkbox"/> \$0.00
Extension fee								\$0.00
TOTAL FEES SUBMITTED HEREWITH								\$0.00

- ☒ No additional fee is required.
- ☐ A check in the amount of _____ is enclosed to cover the above fee(s).
- ☐ Charge Deposit Account No. **09-0946** in the amount of _____.
- ☒ The Commissioner is authorized to charge Counsel's Deposit Account No. **09-0946** for any fees required under 37 CFR §§ 1.16, 1.17 and 1.445 that are not covered, in whole or in part, by a check enclosed herewith and to credit any overpayments to said Deposit Account **09-0946**.

Respectfully submitted,

IRELL & MANELLA LLP

Dated: September 28, 2007

By: 
Christopher A. Vanderlaan
Reg. No. 37,747

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Los Angeles, California 90067-4276
(310) 277-1010

Customer Number 29000